

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

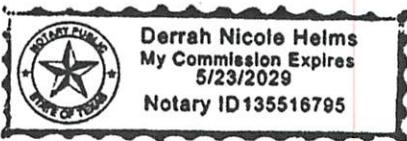
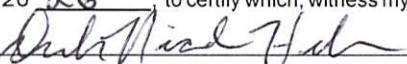
FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.				1 Filter ID (Ethics Commission Filers)	2 Total pages filed: 38	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST John	MI	OFFICE USE ONLY		
	NICKNAME	LAST Nix	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 130126 Tyler TX 75713					
<input type="checkbox"/> Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (903)	PHONE NUMBER 376-4291	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs	FIRST Jennifer	MI	Receipt #	Amount \$	
	NICKNAME	LAST Walsh	SUFFIX	Date Processed		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 5750 Reed Rd			CITY; Tyler	STATE; ZIP CODE 75707	
8 CAMPAIGN TREASURER PHONE	AREA CODE (903)	PHONE NUMBER 561-5061	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit			<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month 7	Day 1	Year 2025	Month 12	Day 31	Year 2025
11 ELECTION	ELECTION DATE Month Day Year 5 / 2 / 2026		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special _____			
12 OFFICE	OFFICE HELD (if any) None			13 OFFICE SOUGHT (if known) Tyler City Mayor		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
<input type="checkbox"/> Additional Pages		COMMITTEE TYPE	COMMITTEE NAME			
		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS			
		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
			COMMITTEE CAMPAIGN TREASURER ADDRESS			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)			
17 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,695.27			
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0			
	4. TOTAL POLITICAL EXPENDITURES	\$ 52,101.66			
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 28,779.06			
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 51,000.00			
18 SIGNATURE	I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.				
 Signature of Candidate or Officeholder					
Please complete either option below:					
(1) Affidavit					
NOTARY STAMP / SEAL					
Sworn to and subscribed before me by <u>John Nix</u>	this the <u>8</u> day of <u>January</u> ,	20 <u>26</u> to certify which, witness my hand and seal of office.			
	<u>Derrah Nicole Helms</u>	<u>Texas Notary Public</u>			
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath			
OR					
(2) Unsworn Declaration					
My name is _____, and my date of birth is _____.					
My address is _____, _____, _____, _____, _____, _____.					
(street)		(city)	(state)	(zip code)	(country)
Executed in _____ County, State of _____, on the _____ day of _____, 20 _____.			(month)	(year)	
Signature of Candidate/Officeholder (Declarant)					

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
John Nix	
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$11,800.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 895.27
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 27,304.34
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 23,329.53
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 1,467.79
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

<p>The Instruction Guide explains how to complete this form.</p>				1 Total pages Schedule A1: 8
2 FILER NAME John Nix				3 Filer ID (Ethics Commission Filers)
4 Date 08/12/2025	5 Full name of contributor Charles R. Reid	<input type="checkbox"/> out-of-state PAC (ID#:)		7 Amount of contribution (\$) \$1500.00
	6 Contributor address; 11911 CR 1168	City:)	State:)	Zip Code 75703
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Date 08/22/25	Full name of contributor Justin Weiner	<input type="checkbox"/> out-of-state PAC (ID#:)		Amount of contribution (\$) \$250.00
	Contributor address; 17961 Timothy Ct	City:)	State:)	Zip Code 75703
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 9/17/25	Full name of contributor Dr Larry Goddard	<input type="checkbox"/> out-of-state PAC (ID#:)		Amount of contribution (\$) \$50.00
	Contributor address; 1222 Jeff Davis Dr	City:)	State:)	Zip Code 75703
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 9/22/25	Full name of contributor 2307 McDonald Rd	<input type="checkbox"/> out-of-state PAC (ID#:)		Amount of contribution (\$) 20.00
	Contributor address;)	City:)	State:)	Zip Code 75701
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.				

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1:
2 FILER NAME John Nix				3 Filer ID (Ethics Commission Filers)
4 Date 9/22/25	5 Full name of contributor Mary Anne Aiken	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)		7 Amount of contribution (\$) \$20.00
	6 Contributor address; 19183 Country Estates Cir	City; Tyler	State; TX Zip Code 75762	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Date 9/22/25	Full name of contributor Toni Fabry	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)		Amount of contribution (\$) \$25.00
	Contributor address; 7338 Willow Creek Dr	City; Tyler	State; TX Zip Code 75703	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 9/22/25	Full name of contributor Kim Holley	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)		Amount of contribution (\$) \$5.00
	Contributor address; 5401 Hollytree Dr #2302	City; Tyler	State; TX Zip Code 75703	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 9/22/25	Full name of contributor Sheryl Hazelwood	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)		Amount of contribution (\$) \$25.00
	Contributor address; 5401 Hollytree Dr #2302	City; Tyler	State; TX Zip Code 75703	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.				

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1:
2 FILER NAME John Nix			3 Filer ID (Ethics Commission Filers)
4 Date 9/22/25	5 Full name of contributor Dennis G.or Pamela Black	<input type="checkbox"/> out-of-state PAC (ID#:)	7 Amount of contribution (\$) \$1000.00
6 Contributor address; 20218 CR 2171		City; State; Zip Code Whitehouse TX 75791	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date 9/22/25	Full name of contributor David Emmert & Sharon Emmert	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of contribution (\$) \$500.00
Contributor address; 3610 Chapel Downs		City; State; Zip Code Tyler TX 75707	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/22/25	Full name of contributor Sharon C. Guthrie	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of contribution (\$) \$250.00
Contributor address; 6808 Gleneagles Dr.		City; State; Zip Code Tyler TX 75703	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/22/25	Full name of contributor Cash donation	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of contribution (\$) \$5.00
Contributor address;		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1:
2 FILER NAME John Nix			3 Filer ID (Ethics Commission Filers)
4 Date 9/25/25	5 Full name of contributor Susan McGee Goolsbee William Scott Goolsbee	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) \$250.00
	6 Contributor address; 1608 Skidmore Ln	City; Tyler State; TX Zip Code 75703	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date 9/25/25	Full name of contributor A.E. Shull	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$100.00
	Contributor address; 7028 Calumet Dr	City; Tyler State; TX Zip Code 75703	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/25/25	Full name of contributor John C. Lowe	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$100.00
	Contributor address; 3208 Teakwood Dr	City; Tyler State; TX Zip Code 75701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/25/25	Full name of contributor Ashley Ferguson	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$500.00
	Contributor address; 407 West 7th St	City; Tyler State; TX Zip Code 75701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1:
2 FILER NAME John Nix			3 Filer ID (Ethics Commission Filers)
4 Date 9/25/25	5 Full name of contributor Janet Plymale	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)	7 Amount of contribution (\$) \$100.00
	6 Contributor address; 9117 Canyon Rd	City: Tyler, State: TX Zip Code 75703	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date 9/29/25	Full name of contributor Vinny Cookson	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)	Amount of contribution (\$) \$100.00
	Contributor address; 15080 CR 1104	City: Flint, State: TX Zip Code 75762	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/30/25	Full name of contributor Sharon C. Guthrie	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)	Amount of contribution (\$) \$50.00
	Contributor address; 6808 Gleneagles Dr	City: Tyler, State: TX Zip Code 75703	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/6/25	Full name of contributor Steve Nix	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)	Amount of contribution (\$) \$250.00
	Contributor address; 5523 Preston Fairways Dr	City: Dallas, State: TX Zip Code 75252	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1:
2 FILER NAME John Nix				3 Filer ID (Ethics Commission Filers)
4 Date 10/9/25	5 Full name of contributor Thomas & Margarita Graham			7 Amount of contribution (\$)
	6 Contributor address; 533 Wilder Way	City; Tyler	State; TX	\$500.00 75703
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
Date 10/15/25	Full name of contributor Wayne & Charlesa Karaki			Amount of contribution (\$)
	Contributor address; 2406 Merrill Dr	City; Tyler	State; TX	\$500.00 75701
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/20/25	Full name of contributor Weldon Les Miller Marjorie Miller			Amount of contribution (\$)
	Contributor address; 731 Bentley Ct	City; Tyler	State; TX	\$250.00 75703
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/30/25	Full name of contributor Sharon C. Guthrie			Amount of contribution (\$)
	Contributor address; 6808 Gleneagles Dr	City; Tyler,	State; TX	\$50.00 75703
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1:
2 FILER NAME John Nix				3 Filer ID (Ethics Commission Filers)
4 Date 11/30/25	5 Full name of contributor Sharon Guthrie	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)		7 Amount of contribution (\$) \$50.00
	6 Contributor address; 6808 Gleneagles Dr	City:	State:	Zip Code
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Date 12/10/25	Full name of contributor John W Gibson Julie J. Gibson	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)		Amount of contribution (\$) \$4000.00
	Contributor address; 22933 CR 422	City:	State:	Zip Code
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 12/15/25	Full name of contributor Laurie Turman	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)		Amount of contribution (\$) \$100.00
	Contributor address; 622 Ridge Creek Dr	City:	State:	Zip Code
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 12/18/25	Full name of contributor Jarad Kent	<input type="checkbox"/> out-of-state PAC (ID#: <u> </u>)		Amount of contribution (\$) \$250.00
	Contributor address; 6223 Bedford Dr	City:	State:	Zip Code
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.				

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1:
2 FILER NAME John Nix			3 Filer ID (Ethics Commission Filers)
4 Date 12/19/25	5 Full name of contributor Phil Burks	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) \$1000.00
	6 Contributor address; 2005 Stonegate Valley Dr	City; Tyler	State; TX
			Zip Code 75703
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address;	City;	State;
			Zip Code
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address;	City;	State;
			Zip Code
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address;	City;	State;
			Zip Code
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1
2 FILER NAME John Nix		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0
5 Date 09/22/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Grassroots America	8 Amount of Contribution \$ 9 In-kind contribution description \$895.27 Meet & greet with Candidate
	7 Contributor address; City; State; Zip Code PO Box 130012 Tyler TX 75713	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:	Amount of Contribution \$ In-kind contribution description
	Contributor address; City; State; Zip Code	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME John Nix	3 Filer ID (Ethics Commission Filers)	
4 Date 07/01/2025	5 Payee name Austin Bank		
6 Amount (\$) \$53.50	7 Payee address; 108 Market Square Blvd	City: Tyler State: TX Zip Code 75703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Ordered checks for expenditures	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Nix	Office sought Tyler City Mayor	Office held None
Date 08/02/2025	Payee name Brett Rogers		
Amount (\$) \$2,200.00	Payee address; 4514 Edinburgh Dr.	City: Tyler State: TX Zip Code 75703	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Consulting	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John Nix	Office sought Tyler City Mayor	Office held None
Date 09/01/25	Payee name Brett Rogers		
Amount (\$) \$1200.00	Payee address; 4514 Edinburgh Drive	City: Tyler State: TX Zip Code 75703	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Consulting	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	John Nix	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	Gravity Films	
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
	3409 McMillan Dr	Tyler	TX 75701
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Advertising Expense	Media	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
7/1/25-12/31/25	Anedot		
Amount (\$)	Payee address;	City;	State; Zip Code
\$158.50	1340 Poydras St. #1770	New Orleans	LA 70112
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Fees	Online contribution fees	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
7/3/25	Austin Bank		
Amount (\$)	Payee address;	City;	State; Zip Code
\$2007.50	108 Market Square Blvd	Tyler	TX 75703
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Accounting/banking	NSF contribution check-\$2000.00 Bank fee-\$7.50	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME John Nix		3 Filer ID (Ethics Commission Filers)
4 Date 09/25/25	5 Payee name Marcelo Landeros		
6 Amount (\$) \$866.00	7 Payee address; 1269 Hagan Rd	City; Whitehouse	State; Zip Code TX 75791
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Videos & pictures for event	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Candidate / Officeholder name		Office sought Office held
Date 10/1/25	Payee name Brett Rogers		
Amount (\$) \$1200.00	Payee address; 4514 Edinburgh Drive	City; Tyler	State; Zip Code TX 75703
 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Consulting	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Candidate / Officeholder name		Office sought Office held
Date 11/05/25	Payee name Brett Rogers		
Amount (\$) \$1200.00	Payee address; 4514 Edinburgh Drive	City; Tyler	State; Zip Code TX 75703
 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Consulting	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Candidate / Officeholder name		Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 12/9/25	5 Payee name Xpresso Print Cafe		
6 Amount (\$) \$11024.36	7 Payee address; 113 University Place	City; Tyler,	State; Zip Code TX 75702
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Christmas Mailer	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 21	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
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5 CREDIT CARD ISSUER	Name of financial institution American Express Platinum		
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6 PAYMENT	(a) Amount Charged \$ 167.69	(b) Date Expenditure Charged 7/21/25	(c) Date(s) Credit Card Issuer Paid 8/18/25
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7 PAYEE	(a) Payee name EasyDNS.com	(b) Payee address;	City, State, Zip Code
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Website/domain
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(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$ 360.82	(b) Date Expenditure Charged 08/06/25	(c) Date(s) Credit Card Issuer Paid 09/22/25
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PAYEE	(a) Payee name Champions for Freedom	(b) Payee address; PO Box 130012	City, State, Zip Code Tyler, TX 75713
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description Grassroots event
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(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
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(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Fliers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
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5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X Business		
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6 PAYMENT	(a) Amount Charged \$ 140.73	(b) Date Expenditure Charged 09/03/25	(c) Date(s) Credit Card Issuer Paid 10/13/25
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7 PAYEE	(a) Payee name Sadie's Stichery	(b) Payee address; 4588 Old Troup Hwy Suite 50	City, State, Zip Code Tyler, TX 75707
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Thank you gifts
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$ 2672.70	(b) Date Expenditure Charged 9/30/25	(c) Date(s) Credit Card Issuer Paid 11/19/25
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PAYEE	(a) Payee name Digital Skyrocket	(b) Payee address; PO Box 131763	City, State, Zip Code Tyler TX 75713
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Website maintenance
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$ 150.00	(b) Date Expenditure Charged 10/08/2025	(c) Date(s) Credit Card Issuer Paid 11/19/25
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PAYEE	(a) Payee name WAGS of East Texas Inc.	(b) Payee address; 323 ESE Loop 323	City, State, Zip Code Tyler TX 75701
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Pars Fore Paws event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
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5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X Business		
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6 PAYMENT	(a) Amount Charged \$ 128.82	(b) Date Expenditure Charged 10/21/25	(c) Date(s) Credit Card Issuer Paid 11/19/25
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7 PAYEE	(a) Payee name Digital Skyrocket	(b) Payee address; PO Box 131763	City, State, Zip Code Tyler TX 75713
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Website management
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture			
6 PAYMENT	(a) Amount Charged \$ 275.95	(b) Date Expenditure Charged 06/19/2025	(c) Date(s) Credit Card Issuer Paid 08/08/2025	
7 PAYEE	(a) Payee name easyDNSTECH.com	(b) Payee address;	City,	State, Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other		(b) Description Website/domain	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 541.25	(b) Date Expenditure Charged 8/22/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Callynth Photography	(b) Payee address; 117 E Erwin St	City, Tyler	State, Zip Code TX 75702
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Head shots-photos	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 1732.00	(b) Date Expenditure Charged 8/29/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name True Vine Brewing Company	(b) Payee address; 2453 Earl Campbell pkwy	City, Tyler	State, Zip Code TX 75701
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Pavillion rental for kick off event	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$	
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture			
6 PAYMENT	(a) Amount Charged \$ 35.71	(b) Date Expenditure Charged 9/11/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
7 PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, State, Zip Code Seattle, WA 98108-1226	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Sign holders	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$86.59	(b) Date Expenditure Charged 9/11/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, State, Zip Code Seattle, WA 98108-1226	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Ring light for videos	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$46.54	(b) Date Expenditure Charged 9/15/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, State, Zip Code Seattle, WA 98108-1226	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Sign holders	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture			
6 PAYMENT	(a) Amount Charged \$ 990.00	(b) Date Expenditure Charged 8/31/25	(c) Date(s) Credit Card Issuer Paid 10/13/25	
7 PAYEE	(a) Payee name Danielle Reeves	(b) Payee address; 7777 Glen America Dr. Apt 330 Dallas TX 75225	City,	State, Zip Code
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Graphic Design for website	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 103.83	(b) Date Expenditure Charged 9/9/25	(c) Date(s) Credit Card Issuer Paid 10/13/25	
PAYEE	(a) Payee name Michaels	(b) Payee address; 5839 S Broadway Ave Tyler, TX 75703	City,	State, Zip Code
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Storage boxes for tshirts and supplies	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 121.18	(b) Date Expenditure Charged 9/10/25	(c) Date(s) Credit Card Issuer Paid 10/13/25	
PAYEE	(a) Payee name Wall Monkeys	(b) Payee address; 2021 St Augustine Rd E. Jacksonville, FL 32207	City,	State, Zip Code
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Large decal for sign	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture			
6 PAYMENT	(a) Amount Charged \$ 300.00	(b) Date Expenditure Charged 8/30/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
7 PAYEE	(a) Payee name Bethesda Health Clinic	(b) Payee address; 409 W Ferguson St. Tyler	City, State, Zip Code TX 75702	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Bethesda event ticket purchase	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 684.95	(b) Date Expenditure Charged 9/2/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name SociaLily	(b) Payee address; 192 CR 4707	City, State, Zip Code Troup TX 75789	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Social Media management	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$389.70	(b) Date Expenditure Charged 9/3/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Impressive Image Works	(b) Payee address; 2901 Teague Dr	City, State, Zip Code Tyler, TX 75701	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Sign	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture			
6 PAYMENT	(a) Amount Charged \$ 64.89	(b) Date Expenditure Charged 9/13/25	(c) Date(s) Credit Card Issuer Paid 10/13/25	
7 PAYEE	(a) Payee name Michaels	(b) Payee address; 5839 S Broadway Ave	City, State, Zip Code Tyler, TX 75703	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Addtl storage	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 46.54	(b) Date Expenditure Charged 9/18/25	(c) Date(s) Credit Card Issuer Paid 11/13/25	
PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, State, Zip Code Seattle WA 98108-1226	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Signs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 205.66	(b) Date Expenditure Charged 9/19/25	(c) Date(s) Credit Card Issuer Paid 11/13/25	
PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, State, Zip Code Seattle WA 98108-1226	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Shelving	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$	
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture			
6 PAYMENT	(a) Amount Charged \$123.92	(b) Date Expenditure Charged 9/22/25	(c) Date(s) Credit Card Issuer Paid 11/13/25	
7 PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, State, Zip Code Seattle WA 98108-1226	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Hardware for bumper signs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$35.71	(b) Date Expenditure Charged 10/1/25	(c) Date(s) Credit Card Issuer Paid 11/13/25	
PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, State, Zip Code Seattle WA 98108-1226	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Microphone	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code	
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expenses
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture		
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6 PAYMENT	(a) Amount Charged \$ 16.41	(b) Date Expenditure Charged 9/24/25	(c) Date(s) Credit Card Issuer Paid 11/13/25
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7 PAYEE	(a) Payee name Walmart	(b) Payee address; 5050 Troup HWY	City, State, Zip Code Tyler TX 75707
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food & Beverage expense	(b) Description Waters for event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$ 97.99	(b) Date Expenditure Charged 9/24/25	(c) Date(s) Credit Card Issuer Paid 11/13/25
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PAYEE	(a) Payee name Office Depot	(b) Payee address; 4329 Old Bullard rd	City, State, Zip Code Tyler TX 75703
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Paper, scissors, pens, pamphlet holder
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$ 29.20	(b) Date Expenditure Charged 9/25/25	(c) Date(s) Credit Card Issuer Paid 11/13/25
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PAYEE	(a) Payee name Office Depot	(b) Payee address; 4329 Old Bullard rd	City, State, Zip Code Tyler TX 75703
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Name tags
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$	
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture			
6 PAYMENT	(a) Amount Charged \$ 18.37	(b) Date Expenditure Charged 9/25/25	(c) Date(s) Credit Card Issuer Paid 11/13/25	
7 PAYEE	(a) Payee name Walmart	(b) Payee address; 6801 S. Broadway ave. Tyler TX 75703	City, State, Zip Code	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Cash lock box	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 18.39	(b) Date Expenditure Charged 11/12/25	(c) Date(s) Credit Card Issuer Paid 12/13/25	
PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, State, Zip Code Seattle, WA 98108-1226	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Other		(b) Description e	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 360.00	(b) Date Expenditure Charged 11/2/25	(c) Date(s) Credit Card Issuer Paid 12/13/25	
PAYEE	(a) Payee name Danielle Reeves	(b) Payee address; 7777 Glen America Dr. Apt 330 Dallas TX 75225	City, State, Zip Code	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Graphic Design for website	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture			
6 PAYMENT	(a) Amount Charged \$ 5.68	(b) Date Expenditure Charged 11/17/25	(c) Date(s) Credit Card Issuer Paid 5	
7 PAYEE	(a) Payee name Crema	(b) Payee address; 2251 Three Lakes Pkwy #107	City, State, Zip Code Tyler, TX 75703	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/beverage Expense		(b) Description Coffee with Gravity Films	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 180.00	(b) Date Expenditure Charged 12/6/25	(c) Date(s) Credit Card Issuer Paid 1/2026	
PAYEE	(a) Payee name Danielle Reeves	(b) Payee address; 7777 Glen America Dr. Apt 330 Dallas, TX 75225	City, State, Zip Code	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Christmas mailer design	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code	
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expenses
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X			
6 PAYMENT	(a) Amount Charged \$ 38.32	(b) Date Expenditure Charged 07/01/25	(c) Date(s) Credit Card Issuer Paid 8/13/25	
7 PAYEE	(a) Payee name AT&T	(b) Payee address; 4757 S. Broadway Ave. Tyler	City, State, Zip Code TX 75703	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead		(b) Description Phone line	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$44.23	(b) Date Expenditure Charged 07/31/25	(c) Date(s) Credit Card Issuer Paid 9/4/25	
PAYEE	(a) Payee name AT&T	(b) Payee address; 4757 S. Broadway Ave. Tyler	City, State, Zip Code TX 75703	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead		(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 638.40	(b) Date Expenditure Charged 8/15/25	(c) Date(s) Credit Card Issuer Paid 9/12/25	
PAYEE	(a) Payee name OpenAI	(b) Payee address; NA	City, State, Zip Code	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Other		(b) Description Research Tool	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X			
6 PAYMENT	(a) Amount Charged \$ 359.01	(b) Date Expenditure Charged 8/27/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
7 PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 N. San Fernando Rd	City, Burbank	State, Zip Code CA 91505
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Informational hand-outs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 64.59	(b) Date Expenditure Charged 8/27/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 N. San Fernando Rd	City, Burbank	State, Zip Code CA 91505
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Informational hand-outs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 204.12	(b) Date Expenditure Charged 8/27/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Sticker Mule	(b) Payee address; 336 Forest Ave.	City, Amsterdam	State, Zip Code NY 12010
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Car magnets	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$	
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X			
6 PAYMENT	(a) Amount Charged \$ 204.12	(b) Date Expenditure Charged 9/8/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
7 PAYEE	(a) Payee name Sticker Mule	(b) Payee address; 336 Forest Ave. Amsterdam NY 12010	City,	State, Zip Code
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description ar a nes	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 118.19	(b) Date Expenditure Charged 9/8/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 N San Fernando Rd Burbank CA 91505	City,	State, Zip Code
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Informational hand-outs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 3726.51	(b) Date Expenditure Charged 9/10/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Impressive Image Works	(b) Payee address; 2901 Teague Dr Tyler, TX 75701	City,	State, Zip Code
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description T-shirts	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X		
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6 PAYMENT	(a) Amount Charged \$ 90.54	(b) Date Expenditure Charged 8/27/25	(c) Date(s) Credit Card Issuer Paid 10/13/25
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7 PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 N. Fernando rd	City, State, Zip Code Burbank CA 91505
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Handouts
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(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
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(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
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(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X			
6 PAYMENT	(a) Amount Charged \$ 70.95	(b) Date Expenditure Charged 9/11/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
7 PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 N. San Fernando Burbank	City, State, Zip Code CA 91505	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Post Cards	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 38.99	(b) Date Expenditure Charged 9/11/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 N. San Fernando Burbank	City, State, Zip Code CA 91505	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Business Cards	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 216.50	(b) Date Expenditure Charged 9/18/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
PAYEE	(a) Payee name Sugarfina	(b) Payee address; 6080 Center Dr	City, State, Zip Code Los Angeles CA 90303	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift Expense		(b) Description Thank you gifts	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X			
6 PAYMENT	(a) Amount Charged \$ 179.55	(b) Date Expenditure Charged 9/18/25	(c) Date(s) Credit Card Issuer Paid 10/9/25	
7 PAYEE	(a) Payee name Fastener	(b) Payee address; 2302 Wisconsin Ave	City, State, Zip Code Downers Grove, IL 60515	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Hardware for bumper signs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 173.20	(b) Date Expenditure Charged 9/30/25	(c) Date(s) Credit Card Issuer Paid 11/13/25	
PAYEE	(a) Payee name Impressive Image Works	(b) Payee address; 2901 Teague Dr	City, State, Zip Code Tyler, TX 75701	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Thrive Signs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 2083.13	(b) Date Expenditure Charged 9/26/25	(c) Date(s) Credit Card Issuer Paid 11/13/25	
PAYEE	(a) Payee name Sola Bread	(b) Payee address; 2453 Earl Campbell pkwy	City, State, Zip Code Tyler, TX 75701	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Food for Event	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix		3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X		
6 PAYMENT	(a) Amount Charged \$ 1442.00	(b) Date Expenditure Charged 10/2/25	(c) Date(s) Credit Card Issuer Paid 11/13/25
7 PAYEE	(a) Payee name SocialLily	(b) Payee address; 192 CR 4707	City, State, Zip Code Troup TX 75789
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Social Media	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought Office Held
PAYMENT	(a) Amount Charged \$ 62.81	(b) Date Expenditure Charged 10/6/25	(c) Date(s) Credit Card Issuer Paid 11/13/25
PAYEE	(a) Payee name AT&T	(b) Payee address; PO Box 6463	City, State, Zip Code Carol Stream IL 60197
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead	(b) Description Phone	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought Office Held
PAYMENT	(a) Amount Charged \$ 69.03	(b) Date Expenditure Charged 10/2/25	(c) Date(s) Credit Card Issuer Paid 11/13/25
PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 San Fernando rd Burbank	City, State, Zip Code CA 91505
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Informational hand-outs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$	
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X			
6 PAYMENT	(a) Amount Charged \$ 115.00	(b) Date Expenditure Charged 10/5/25	(c) Date(s) Credit Card Issuer Paid 11/13/25	
7 PAYEE	(a) Payee name Smith County Republican Women	(b) Payee address; 3923 S Broadway Ave	City, Tyler	State, Zip Code TX, 75701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Smith Co Republican Women's lunch event	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 424.44	(b) Date Expenditure Charged 10/23/25	(c) Date(s) Credit Card Issuer Paid 12/13/25	
PAYEE	(a) Payee name Sticker Mule	(b) Payee address; 336 Forest Ave.	City, Amsterdam NY 12010	State, Zip Code
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Car magnets	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 200.00	(b) Date Expenditure Charged 10/29/29	(c) Date(s) Credit Card Issuer Paid 12/13/25	
PAYEE	(a) Payee name Junior League of Tyler	(b) Payee address; 1919 S. Donnybrook	City, Tyler	State, Zip Code TX 75701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Mistletoe & Magic event	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME John Nix			3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$	
5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X			
6 PAYMENT	(a) Amount Charged \$ 487.13	(b) Date Expenditure Charged 10/29/25	(c) Date(s) Credit Card Issuer Paid 12/13/25	
7 PAYEE	(a) Payee name Digital Skyrocket	(b) Payee address; PO Box 131763	City, State, Zip Code Tyler, TX 75713	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Website management	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 1272.05	(b) Date Expenditure Charged 11/2/25	(c) Date(s) Credit Card Issuer Paid 12/13/25	
PAYEE	(a) Payee name SociaLily	(b) Payee address; 192 CR 4707	City, State, Zip Code Troup TX 75789	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Social media management	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
PAYMENT	(a) Amount Charged \$ 875.50	(b) Date Expenditure Charged 12/1/25	(c) Date(s) Credit Card Issuer Paid 1/2026	
PAYEE	(a) Payee name SociaLily	(b) Payee address; 192 CR 4707	City, State, Zip Code Troup TX 75789-7449	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Social Media management	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held

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**PAYMENT MADE FROM POLITICAL CONTRIBUTIONS
TO A BUSINESS OF C/OH**

SCHEDULE H

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H: 1	2 FILER NAME John Nix	3 Filer ID (Ethics Commission Filers)	
4 Date 10/24/25	5 Business name Nix Construction, Inc.		
6 Amount (\$) \$1467.79	7 Business address; 1515 Jeff Davis Dr	City: Tyler State: TX Zip Code: 75703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Materials & labor for building and installing "Nix" bumper signs & Campaign Phone bill.	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Business name		
Amount (\$)	Business address;	City:	State: Zip Code
 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Business name		
Amount (\$)	Business address;	City:	State: Zip Code
 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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